MINUTES OF THE JOINT HEALTH AND HUMAN SERVICES APPROPRIATION SUBCOMMITTEE

Monday, February 5, 2001 Room 403, State Capitol Building

Members Present: Sen. David H. Steele, Committee Co-Chair

Rep. Jack A. Seitz, Committee Co-Chair

Sen. Edgar Allen Sen. Curtis S. Bramble Rep. Trisha Beck Rep. David L. Hogue Rep. David Litvack Rep. Rebecca Lockhart Rep. Carl S. Saunders

Members Excused: L. Steven Poulton

Members Absent: Rep. Matt Throckmorton

Staff Present: Thor Nilsen, Legislative Fiscal Analyst

Spencer C. Pratt Legislative Fiscal Analyst

Norda Shepard, Secretary

Public Speakers Present: Rod Betit, Executive Director, Department of Health

Chad Westover, Administrator, CHIP

Cathy Chambless, Governor's Council for People with Disabilities Gary Edwards, Director, Southwest Utah Public Health Department

Glen Curtis, Board Member, Bear River Board of Health Mark Walsh, Associate Director, Utah Association of Counties

Bill Cox, Rich County Commissioner

Scott Williams, Deputy Director, Department of Health Gar Elison, Director, Medical Education Council John Bailey, Director, Bear River Health Department Dave Gessel, Vice President, Utah Hospital Association

Visitor List on File

Committee Co-Chair Steele called the meeting to order at 2:05 p.m.

1. Budget Hearing: Department of Health - Children's Health Insurance Program (CHIP)

Analyst Spencer Pratt discussed the budget recommendations for CHIP. He explained that this program provides health insurance coverage to uninsured children up to age 19 who live in families with income less than 200 percent of the Federal Poverty Levels. The Analyst's recommended budget is \$24,628,600. Mr. Pratt discussed the requirements for enrollment in the program which are (1) 18 years old or younger, (2) live in a family with incomes below 200 percent of the Federal Poverty Level, (3) not eligible for Medicaid, and (4) uninsured. He stated there has been a steady growth in enrollment since implementation of the program.

Rod Betit, Executive Director, Department of Health, reminded committee members that this program came as a result of a governor's initiative a few years ago. He explained that there is more flexibility and state discretion in the CHIP program than there is Medicaid. He stated that Utah's program is patterned after what a typical employer plan would be for dependant children, rather than the benefit program which Medicaid offers which is more expensive. There are cost sharing provisions but no monthly premium is required. He stated they have elected to keep the CHIP program separate from medicaid but have used some of the same support personnel

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rather than create a new division in the department.

Chad Westover, CHIP Administrator, stated they have tried to design a program that would work well with the private sector and would supplement and create a safety net for those who have fallen through the cracks that would otherwise not have any health coverage. He discussed the fact sheet distributed to committee members which showed a pie chart of Utah's uninsured children and a chart of CHIP weekly enrollment. He stated there are still many children who qualify for the program who are not enrolled. He stated they have tried to streamline their enrollment process with a toll free hot line, which is answered by a live person, not a recording, and by using a one page, simple to fill out application. He stated their enrollment the first year was 10,000, 17,000 in the second year and they currently have 20,837 enrolled. He said that 40% of Utah children who are not enrolled are insured by the private sector. He reported that they are doing outreach activities, such as TV and radio announcements and meeting with ethnic groups, in order to get the word out and educate people about the program. In answer to committee questions, Mr. Westover talked about the dental care and the preventive care aspects of CHIP.

2. Appropriations Request - Rep. Hogue

Rep. Hogue stated that this appropriations bill, H.B. 47, Appropriation for Long-Term Professional Development Programs for Disability Service, had been presented to the Health and Human Services Standing Committees and also before the House and is now in the appropriations stage. He stated that H.B. 47would appropriate \$495,000 from the General Fund to the Center for Persons with Disabilities at Utah State University. He said the purpose of the appropriations will be to fund training for supported job coaches, interpreters for the deaf, and behavior support specialists.

Cathy Chambless from the Governor's Council for People with Disabilities stated she was also on the coordinating council for seven different state agencies who are all in agreement that this is the way they wanted the funding to go through rather than each one separately. She stated that in response to the testimony given in regard to the waiting list last Friday, we need to be prepared with trained, skilled providers to be assured needed quality services can be rendered. She stated that Utah State has done an excellent job in this area.

3. Voting on Budgets

MOTION: Rep. Seitz moved to approve items, People in Need of Emergency Services, Waiting List, and USDC Direct Care Cost, without funds at this time, for the priority list for the Division of Services for People with Disabilities in the Division of Human Services. The motion passed unanimously.

Analyst Pratt gave as an informational item that Tab 17 in the Budget Analysis Book is the Health Policy Commission historical budget only. There is no recommendation as the commission was eliminated last July.

4. Budget Hearing: Department of Health - Local Health Departments

Analyst Pratt indicated that this is recommended to be a new separate line item, moved from the Executive Director's budget, with a recommended budget of \$1,984,600, all from General Funds. The funding goes to the 12 local health_departments throughout the state who provide local public health services. Mr. Pratt stated that the Local Health Department's budgets were reduced by \$100,000 in FY2001. They are requesting that this funding be restored in FY2002. The Analyst is recommending that this item be considered for additional funding prioritization.

Gary Edwards, Director, Southwest Utah Public Health Department, said he appreciated the opportunity to speak to the committee specifically about core public health services, which services are tied to communicable

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disease prevention and control. He stated that each local department is governed by local boards who set policy, but even though they are local, much of what they do is a result of statue and state rule that has to be accomplished. He stated public health is to promote health and prevent disease. They look primarily in this area at vaccine preventable diseases, sexually transmitted diseases, HIVand AIDS, and food borne illnesses. He reported there are approximately 4300 cases of communicable diseases reported each year and numerous suspected cases that need confirmation. All of this takes a fair amount of staff time.

Glen Curtis, Board Member, Bear River Board of Health, discussed the distributed funding request for the Local Health Departments. The handout had graphs showing the funding sources from the state, from fees and from the counties from 1995 through 2000. He noted that for each \$1 from the state, there are \$10 contributed from the counties. They are requesting \$500,000 for core public health services, and a COLA on all state contracts to local health departments. He stated they also support the analyst's recommendation to create a separate Local Health Department line item on the budget.

Mark Walsh, Association Director, Utah Association of Counties, stated the association supports the Local Health Department's requests.

Bill Cox, Rich County Commissioner, stated that the counties are picking up a good share of the cost for local health departments. He said as counties they are concerned about food inspections, including schools, the immunization programs, and the tobacco prevention programs. He stated that all these programs are important for the public health. He explained some of the difficulties in Rich County where the Local Health Department is the only available health care. He stated the departments desperately need help from the state and asked for support of the requested funding.

Mr. Betit stated he supports the recommendation to restore the \$100,000 and \$400,000 to be added for the Local Health Departments.. He said the counties definitely need this support from the state.

John Bailey, Director, Bear River Health Department, responded to a question on inspection fees stating that these inspections are funded by fees of 50% to 60%. He stated that when the fees were first instated there was some objection and he felt that raising them would bring more of an outcry. He stated that these inspections do have a great public health implication and benefit.

Scott Williams, Deputy Director, Department of Health, explained that when talking about core services, they are usually talking about things that only a public agency can do. A public agency has to have authority.

5. <u>Budget Hearing: Department of Health - Medical Education Council</u>

Mr. Pratt explained that a few years ago the Legislature created the Medical Education Council to determine the types and numbers of health care professionals that will be needed in the future to provide health care, to seek public and private funding for clinical training and to determine a method to reimburse the institutions that sponsor clinical training so they will continue to sponsor that training. The funding from last year was one time in nature, it does not continue for FY2002. The only funding in the Analyst's recommendation is to carry the nonlapsing balance of \$43,500 forward. The council is confident that if they were to receive another \$110,000 in state funds, they could match it again with about a four to one federal match to continue on with their programs.

Gar Elison, Director, Medical Education Council, discussed a handout from the council that gave background and purpose of the council. He stated the council originally came into existence to mitigate the impact of the Balanced Budget act on Utah's clinical training programs. He discussed some of the recent accomplishments that are outlined on the handout. He stated their appropriations requests are for continued state support of the MEC at \$110,000, which brings a federal annual match of \$440,000, which would provide means to continue

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the work of the council. He also asked for continued general philosophical support for conducting the policy analysis and workforce requirement studies.

Dave Gessell, Vice President, Utah Hospital Association, said he wanted to give the committee a different perspective, although they are supportive of the Medical Education Council. He stated this council was the direct result of the federal government reducing funding for residency and other medical position training. The hospitals are concerned that the council can determine where residences serve. As it is now, the hospitals have a very large say where they serve. He stated that his association has been impressed with the Medical Education Council's abilities to try to find new ways to fund this program. He said the bottom line is they support the budget request and think it has worth, both for the institutions and the citizens of Utah to help maintain and hopefully improve the number of medical residences and nurses in the state.

MOTION: Rep. Saunders moved to adjourn. The motion passed unanimously. Co-Chair Steele adjourned the meeting at 4:15 p.m.

Minutes reported by Norda Shepard, Secretary.		
Sen. David H. Steele	Rep. Jack A. Seitz	
Committee Co-Chair	Committee Co-Chair	